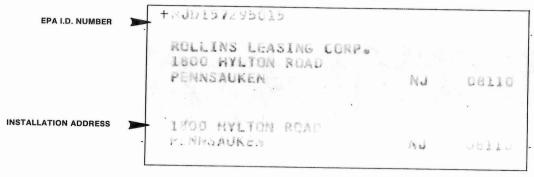


ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act(RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.



EPA Form 8700-12B (4-80)

04/06/86

		*	

United States Environmental Protection Agency Washington, DC 20460

SEPA Notification of Hazardous Waste Activity

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation

For Official Use Only
Comments
C
Installation's EPA ID Number Approved (yr. mo. day)
FNJD 157295015TAC 880328 007
I. Name of Installation
ROLLINS LEASING CORP
II. Installation Mailing Address
Street or P.O. Box
3 / 8 0 0 H Y L T 0 N B d
C 2 2 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1
4 P E N N S A U K E N N J O 8 J 1 O
Street or Route Number
C
5 S A M E
City or Town State ZIP Code
6
IV. Installation Contact
Name and Title (last, first, and job title) Phone Number (area code and number)
2 MATLOCK JOHN 6096654477
V. Ownership
A. Name of Installation's Legal Owner B. Type of Ownership (enter code)
RBOLLINS LEASING CORP
VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)
A. Hazardous Waste Activity B. Used Oil Fuel Activities
☐ 1a. Generator ☐ 1b. Less than 1,000 kg/mo. ☐ 6. Off-Specification Used Oil Fuel (enter 'X' and mark appropriate boxes below)
3. Treater/Storer/Disposer a. Generator Marketing to Burner
4. Underground Injection
5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below) C. Burner
a. Generator Marketing to Burner 7. Specification Used Oil Fuel Marketer (or On site Burner)
□ b. Other Marketer Who First Claims the Oil Meets the Specification
VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate hoxes to indicate type of combustion device/slip
which hazardous waste fuel or orr-specification used oil fuel is burned. See instructions for definitions of combustion devices.)
A. Utility Boiler
VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es)
IX. First or Subsequent Notification
Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.
A. First Notification B. Subsequent Notification (complete item C)
B. Subsequent Notification (complete item C)

		Section of the contract	w		1.
cription of H	azardous Wastes /c				
dous Wastes fro	om Nonspecific Sources	. Enter the four-digit nu	mber from 40 CFR Part 26	61.31 for each listed	hazardous waste
1	2	3	4	5	6
7	8	9	10	11	12
dous Wastes fro	om Specific Sources. En	ter the four-digit number	r from 40 <i>CFR</i> Part 261 3	2 for each listed haza	ardous waste from
ic sources your	installation handles. Use	additional sheets if nece	essary.	- 101 94911 110104 11021	Tracas waste from
13	14	15	16	17	18
			May Sal Dal Ball MA	34 25 . 51	Minis
19	20	21	22	23	24
			7 7 7	78 8	1
25	26	. 27	28	29	30
. 19			2 2 2 2 2		3.3
nercial Chemica estallation handl	i Product Hazardous Wa les which may be a hazar	istes. Enter the four-digi dous waste. Use addition	it number from 40 <i>CFR</i> Panal sheets if necessary.	art 261.33 for each c	hemical substance
31	32	33	34	35	36
		- =			
37	38	39	40	41	42
	A. B. B. S.				
43	44	45	46	47	48
		W 22	22 2 2 2	2 3 3	Maria i
Infectious Was or medical and	tes. Enter the four-digit research laboratories you	number from 40 CFR Par ir installation handles. U	t 261.34 for each hazard se additional sheets if ne	ous waste from hosp cessary.	itals, veterinary hos
49	50	51	52	53	54
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		2 15	Page at the	
cteristics of Nor	nlisted Hazardous Waste	s. Mark 'X' in the boxes	corresponding to the cha	racteristics of nonlis	ted hazardous waste
🛛 1. Ignitabl		2. Corrosive	☐ 3. Reactive		4. Toxic
1/	Min Jack T. A. Land	(D002)	(D003)	N JOSE	(D000)
tify under per and all attack ining the info	hed documents, and ormation, I believe the	that based on my is at the submitted info	nquiry of those indiv ormation is true, accu	riduals immediate grate, and comple	ely responsible i ete. I am aware th
	10/	-			ite Signed
mal. V	111.	h. D.	T = 1/C	rviel 3	3/22/88
	dous Wastes from specific sources for sources from specific sources from sources from sources from sources from sources from stallation	dous Wastes from Nonspecific Sources conspecific sources your installation hands of the second secon	cription of Hazardous Wastes (continued from from from food dous Wastes from Nonspecific Sources. Enter the four-digit number sources your installation handles. Use additional sheet it is sources your installation handles. Use additional sheet it is sources your installation handles. Use additional sheets if necessary in the food of the foo	dous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 20 nonspecific sources your installation handles. Use additional sheets if necessary. 1	cription of Hazardous Wastes (continued from from 40 cff Part 261.31 for each listed horspecific sources your installation handles. Use additional sheets if necessary. 1

71 :4 NG 88 AAM 8881

NEW YORK, HERON II.



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

03/22/93

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> : NJD157295015

FACILITY NAME -> ROLLING LEASING CORP 2178

MAILING ADDRESS -> ONE ROLLINS PLZ ENVIRONMENTAL DEPT WILMINGTON, DE 19803

INSTALLATION ADDRESS ->

1800 HYLTON RD PENNSAUKEN, NJ 08110

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY **REGION II 26 FEDERAL PLAZA NEW YORK, NEW YORK 10278**

ATTN: AIR & WASTE MANAGEMENT DIVISION, ROOM 1006 **HAZARDOUS & SOLID WASTE PROGRAMS BRANCH RCRA NOTIFICATIONS**

TO: RUSSELL, TERRY BRANCH MGR ROLLINS LEASING CORP 2178 1800 HYLTON RD PENNSAUKEN, NJ 08110

Charge mailing address

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Form Approved. OMB No. 2050-0028. Expires 10-31-91 GSA No. 0246-EPA-OT

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation

Notification of Regulated Waste Activity

Date Received (For Official Use Only)

031093

and Recovery Act). United States Environmental Protection Agency
I. Installation's EPA ID Number (Mark 'X' in the appropriate box)
A. First Notification (complete item C) B. Subsequent Notification (complete item C) C. Installation's EPA ID Number
II. Name of Installation (Include company and specific site name)
BUPIES OKASIDA CORD-3/18
III. Location of Installation (Physical address not P.O. Box or Route Number)
Street VIDE IN
\\ 8 0 0 A V 0 0 A 0 A 0 1 1 1 1 1 1 1 1
Silect (commisse)
City or Town State ZiP Code
0 K 0 D B D N K K D I I I N D D B N D I I I I
County Code County Name
TRUBLE DETENDING
IV. Installation Mailing Address (See Instructions)
Street or P.O. Box
DOKI BUNKERS BURKAR KAN IRON OKOT
City or Town State ZIP Code
132 MINGTON 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
V. Installation Contact (Person to be contacted regarding waste activities at site)
Name (last) (first)
RUBBKUN TKRRV
Job Title Phone Number (area code and number)
ERAN, NURR INTRIBUTION
VI. Installation Contact Address (See Instructions)
A. Contact Address B. Street or P.O. Box
City or Town State ZIP Code
E obtained File information, be severable adomitted information is not so within, and postpile so are seen
VII. Ownership (See Instructions)
A. Name of installation's Legal Owner
ADDOZOS OKASING CORR
Street, P.O. Box, or Route Number
ONK RODUZOS PURZA
City or Town State ZIP Code
02NM2NG70N NK/4810131-1
Phone Number (area code and number) B. Land Type C. Owner Type D. Change of Owner (Date Changed) Indicator Month Day Year

/III. Type of Regulated Waste Activ	ity (Mark 'Y' in the enr	ronriste hovee Pet	er to instructions)	<i>h</i>
		ropriale boxes. Her	Y	Fred Anticipes
	ous Waste Activity			Fuel Activities
1. Generator (See Instructions) a. Greater than 1000kg/mo (2,200 b. 100 to 1000 kg/mo (220 - 2,200 c. Less than 100 kg/mo (220 lbs.) 2. Transporter (Indicate Mode in boxes a. For own waste only b. For commercial purposes Mode of Transportation 1. Air 2. Rail 3. Highway 4. Water 5. Other - specify X. Description of Regulated Waste	itie.) Note: A y this activ I lbs.) 4. Hazardor a. General b. Other c. Burn Type 1. 2 3. 5. Undergrees (Use additional sheet)	bund Injection Control ts if necessary) ne boxes corresponding	a. Gel b. Otir c. Bur Typ 2. Specific (or On- the Oil	pecification Used Oil Fuel nerator Marketing to Burne ner Marketer mer - indicate device(s) - pe of Combustion Device 1. Utility Boiler 2. Industrial Boiler 3. Industrial Furnace cation Used Oil Fuel Markets the Specification Meets the Specification
wastes your installation handles. (See	9 40 CFR Parts 261.20 - 26			
1. Ignitable 2. Corrosive 3. Reacting (D001) (D002) (D003)		(List specific EPA ha	zardous waste number acteristic contaminant	r(s) for the Toxicity s))
3. Listed Hazardous Wastes. (See 40 C	CFR 261,31 - 33. See instr	uctions if you need to lis	t more than 12 waste o	odes.)
1 2 000 3	3	10	5	6
C. Other Wastes. (State or other wastes	requiring an LD number.	See instructions)		
2			5	1
		18 19 10	24 24 1	the course iv.
Cartification				
Certification certify under penalty of law that	I have never all	minad and am famil	lorwith the Info	otion out military in the
and all attached documents, are potaining the information, I believe that there are significant penal imprisonment.	nd that based on my eve that the submitte	inquiry of those in d information is tru	ndividuals immed ie, accurate, and	liately responsible f complete. I am awa
gnature	Name and Officia Ralph E. Director	l Title <i>(type or print)</i> Grant Environmenta		Signed 03/03/93
I. Comments				1
NOTE CHANGES IN	TAM(VI) G	THE POR	CLAP EBY	1) - 7 - 6
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